Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application of Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 0 Substitute for Form PTO-875 OTHER THAN **APPLICATION AS FILED - PART I** OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$) RATE (\$) FEE (S) BASIC FEE (37 CFR 1.16(a), (b), or (c)) SEARCH FEE (37 CFR 1.16(k), (i), or (m)) **EXAMINATION FEE** (37 CFR 1.18(a), (p), or (q)) TOTAL CLAIMS 29 minus 20 = . OR . (37 CFR 1.16(i)) INDEPENDENT CLAIMS 8 (37 CFR 1.16(h)) minus 3 = x 8 = If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each (37 CFR 1.16(a)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1)) \* If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR 4/19 (Column 1) (Calumn 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE (\$) RATE (\$) A PREVIOUSLY **EXTRA AFTER** TIONAL TIONAL AMENDMENT PAID FOR FEE (\$) FEE (\$) Minus Total (37 CFR 1.10(1)) 29 29 . OR ENDM Independent (37 CFR 1,16(ti)) OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I)) OR TOTAL TOTAL OΒ ADD'L FEE ADD'L FEE -0(Calumn 1) (Cotumn 2) (Column 3) CLAIMS HIGHEST REMAINING PRESENT ADOI-TIONAL NUMBER RATE (\$) RATE (\$)  $\omega$ **AFTER** PREVIOUSLY EXTRA TIONAL AMENDMENT PAID FOR FEE (\$) FEE (\$) ũ Total (37 CFR 1.15(1)) Minus 26 AMENDM x OR Independent (37 CFR 1.16(h)) 2 = OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I)) OR TOTAL ADD'L FEE TOTAL OR ADD'L FEE

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• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any commenta on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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ń	PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2001												
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMAL TYPE		NTITY	OR	OTHER SMALL		
TOTAL CLAIMS			``````				RA	TE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS		BLE CLAIMS	<b>ラ</b> ′ minus 20=		* Z.		X\$	9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		*		X4	2=		OR	X84=		l
MULTIPLE DEPENDENT CLAIM P			RESENT				+14	0=		OR	+280=		
* If	the difference	ess than ze	s than zero, enter "0" in column 2			TO	ΓAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II										•	OTHER		
10-	18-04	(Column 1) CLAIMS	· ·	(Colu	mn 2)	(Column 3)	SM	ALL	ENTITY	OR I	SMALL		4
<b>AMENDMENT A</b>		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	ō
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6-	-9-05	(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT	. FEE		•	ADDII. 1 CC		
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	e Co
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		•					ADDIT	OTAL		OR	TOTAL ADDIT. FEE		
7-	8-05-	(Column 1)		(Colu	mn 2)	(Column 3)				_			]
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
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	Independent	* 2_	Minus	***	3 TCI AIM	=	X4:	2=		OR	X84=		1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=										OR	+280=		1
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
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